## ECONOMIC CRIME - INDIVIDUAL VICTIM IMPACT STATEMENT

CASE NAME:  CASE No.  1. How have you been affected by this crime? Continue on an additional sheet of paper if necessary, but be concise. Provide victim loss information only for the amount of loss sustained as a result of the convicted offense(s). Itemize victim financial loss information. Attach documentation (canceled checks, receipts, etc.) to support your figures.  2. Have you been reimbursed or will you be reimbursed (insurance or otherwise) for any portion of the loss listed above? No Yes If yes, explain and provide the name and address of the company that reimbursed your loss, the claim number for the loss, and how much reimbursement you received.  3. Have you or anyone on your behalf initiated civil action against any party as a result of this criminal offense? YES NO  If yes, list case name, docket number, and court of jurisdiction.  I declare under penalty of perjury that the information contained in this victim impact statement is true and correct.  SIGNATURE:	VICTIM NAME:		
CASE NAME:	MAILING ADDRESS:		
1. How have you been affected by this crime? Continue on an additional sheet of paper if necessary, but be concise. Provide victim loss information only for the amount of loss sustained as a result of the convicted offense(s). Itemize victim financial loss information. Attach documentation (canceled checks, receipts, etc.) to support your figures.  2. Have you been reimbursed or will you be reimbursed (insurance or otherwise) for any portion of the loss listed above? No Yes If yes, explain and provide the name and address of the company that reimbursed your loss, the claim number for the loss, and how much reimbursement you received.  3. Have you or anyone on your behalf initiated civil action against any party as a result of this criminal offense? YES NO If yes, list case name, docket number, and court of jurisdiction.  I declare under penalty of perjury that the information contained in this victim impact statement is true and correct.  SIGNATURE:	CITY:	STATE:	ZIP:
otherwise) for any portion of the loss listed above? No Yes If yes, explain and provide the name and address of the company that reimbursed your loss, the claim number for the loss, and how much reimbursement you received.  3. Have you or anyone on your behalf initiated civil action against any party as a result of this criminal offense? YES NO  If yes, list case name, docket number, and court of jurisdiction.  I declare under penalty of perjury that the information contained in this victim impact statement is true and correct.  SIGNATURE:	1. How have you been affer of paper if necessary, but for the amount of loss sus Itemize victim financial 1	ected by this crime? Control of the concise. Provide vistained as a result of the constitution. Attack	ntinue on an additional sheet ictim loss information only the convicted offense(s).
otherwise) for <u>any</u> portion of the loss listed above? No Yes If yes, explain and provide the name and address of the company that reimbursed your loss, the claim number for the loss, and how much reimbursement you received.  3. Have you or anyone on your behalf initiated civil action against any party as a result of this criminal offense? YES NO  If yes, list case name, docket number, and court of jurisdiction.  I declare under penalty of perjury that the information contained in this victim impact statement is true and correct.  SIGNATURE:			
as a result of this criminal offense? YES NO  If yes, list case name, docket number, and court of jurisdiction.  I declare under penalty of perjury that the information contained in this victim impact statement is true and correct.  SIGNATURE:	otherwise) for <u>any</u> portion explain and provide the na	n of the loss listed aboame and address of the o	ove? No Yes If yes, company that reimbursed your
as a result of this criminal offense? YES NO  If yes, list case name, docket number, and court of jurisdiction.  I declare under penalty of perjury that the information contained in this victim impact statement is true and correct.  SIGNATURE:			
victim impact statement is true and correct.  SIGNATURE:	as a result of this criming	nal offense? YES	NO
			rmation contained in this
	SIGNATURE:  DATE STATEMENT COMPLETED:		